



# ICD-9-CM 2007 Updates for Outpatient Professional Services

**Presented by the UBO Program Manager**

**26 September 2007 at 0600 EDT, 0900 EDT,  
1100 EDT**

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**28 September at 0600 EDT, 0900 EDT, 1100,  
1430**

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# Overview

- Discuss 2007 new ICD-9-CM codes
- Review 2007 revised ICD-9-CM codes
- Discuss 2007 deleted ICD-9-CM codes
- Discuss how to use pivot table so each base will know exactly which codes have changed that they used in 2006

# Objectives

- Given list of revised codes, identify those with the most impact at your facility and know what to do about it.
- Given a list of deleted codes, select actions that should be taken.
- Given a list of new codes, select those clinics/personnel who need to be notified.

# How this flows

- Big Impacts
- Medium Stuff
- Who Cares

# Big Impacts

- Probably on super bills, templates or cheat sheets
- Used lots and lots and lots in OUTPATIENT professional coding
- You need to do something regarding these codes

# Big Impact Changes

- Pain
- Post Nasal Drip
- Hearing
- V58.3 – Attention to Surgical Dressings

# New Category for Pain, NEC (338)

- Mostly were coded previously in the 780s, pain
- Important for surgical specialties, pediatrics and family practice clinic
- The category **excludes** the **new**
  - 780.96 - Generalized Pain
- The category also excludes the existing
  - 307.80 – Psychogenic Pain, Site Unspecified

# All New Category for Pain, NEC (338)

## 338 Pain

- 338.0 - Central pain syndrome
- 338.1 - Acute pain (need 5<sup>th</sup> digit)
- 338.11 - Acute pain due to trauma
- 338.12 - Acute post-thoracotomy pain
- 338.18 - Other acute postoperative pain
- 338.19 - Other acute pain
- 338.2 - Chronic pain (need 5<sup>th</sup> digit)
- 338.21 - Chronic pain due to trauma
- 338.22 - Chronic post-thoracotomy pain
- 338.28 - Other chronic postoperative pain
- 338.29 - Other chronic pain
- 338.3 - Neoplasm related pain (acute) (chronic)
- 338.4 - Chronic pain syndrome



# Somewhat Related

- New code in the abnormal movement disorders 333.9
  - 333.94 Restless Legs Syndrome (RLS). Discomfort deep inside the legs that is relieved by keeping the legs in motion

# New 5<sup>th</sup> Digit Codes – Head and Neck

- Tell family practice, and ENT providers
- Was 784.9 – Other symptoms involving head and neck – this code now requires a 5<sup>th</sup> digit
- 784.91 – Postnasal drip
- 784.99 – Other symptoms involving head and neck

# Revised Code for Hearing Loss

- Tell ENT and audiology that laterality has been added to sensorineural hearing loss
- Was 389.1 Sensorineural hearing loss had 5 subcategories. It has expanded so now it has 7 subcategories. The existing were revised (389.10, 389.11, 389.12, 389.14 and 389.18)
- 389.10 Sensorineural hearing loss, unspecified (not changed)
  - 389.11 Sensory hearing loss, bilateral
  - 389.12 Neural hearing loss, bilateral
  - 389.14 Central hearing loss, bilateral
  - 389.15 Sensorineural hearing loss, unilateral
  - 389.16 Sensorineural hearing loss, asymmetrical
  - 389.18 Sensorineural hearing loss of combined types, bilateral

# Revised Code – For Hearing Exams

- Tell ENT, Audiology and Flight Medicine
- Was V72.1 – Examination of Ears and Hearing - this code now requires a 5<sup>th</sup> digit
- The new codes also has the same DoD extenders as V72.1
- V72.11 – Encounter for hearing examination following failed hearing screening
  - V72.11 1 Encounter for hearing examination following failed hearing screening, otoscopic exam done
  - V72.11 2 Encounter for hearing examination following failed hearing screening, otoscopic exam not performed
- V72.19 – Other examination of ears and hearing
  - V72.19 1 – Other examination of ears and hearing, otoscopic exam done
  - V72.19 2 – Other examination of ears and hearing, otoscopic exam not performed

# New 5<sup>th</sup> Digit Codes – Surgical Dressings

- Tell surgical specialties, and primary care (e.g, family practice, pediatrics, internal medicine)
- V58.3 – Attention to Surgical Dressings and Sutures – this code now requires a 5th digit
- V58.30 – Encounter for change or removal of **nonsurgical** wound dressing
- V58.31 – Encounter for change or removal of **surgical** wound dressing
- V58.32 – Encounter for removal of sutures

# **New Category For Conditions Complicating Pregnancy, Childbirth or Purpureum (649)**

- Make sure you tell your obstetrical providers. Also let family practice and any other providers at your facility who follow pregnancies know. If a non-obstetrician is following a pregnancy, many of these conditions will cause the patient to be transferred to an obstetrician.
- The conditions include:
  - 649.0x - Tobacco use (previously 648.4 mental health)
  - 649.1x - Obesity (previously 648.9 other current)
  - 649.2x - Bariatric surgery
  - 649.3x - Coagulation defects (previously 648.9 other current)
  - 649.4x - Epilepsy
  - 649.5x - Spotting
  - 649.6x - Uterine size date discrepancy

# Other OB/GYN

- Kind of biggie
- 795.06 Papanicolaou Smear Of Cervix With Cytologic Evidence Of Malignancy
- Not biggie, but it kind of fits in here
- 629.81 Habitual Aborter Without Current Pregnancy
- 629.89 Other Specified Disorders Of Female Genital Organs
- V86 - new category for estrogen receptor status (code first the neoplasm of breast 174.00-174.9, 175.0-175.9)
  - V86.0 - Estrogen receptor positive status (ER+)
  - V86.1 - Estrogen receptor negative status (ER-)

# New Category for Pediatric Body Mass Index (V85.5)

- Tell your pediatricians
- Prior V85 codes did not include pediatric
- V85.5 Body Mass Index, Pediatric (for use for persons age 2-20 years old).
- V85.51 Body Mass index, pediatric, less than 5<sup>th</sup> percentile for age
- V85.52 Body Mass index, pediatric, 5<sup>th</sup> percentile to less than 85<sup>th</sup> percentile for age
- V85.53 Body Mass index, pediatric, 85<sup>th</sup> percentile to less than 95<sup>th</sup> percentile for age
- V85.54 Body Mass index, pediatric, greater than or equal to 95<sup>th</sup> percentile for age



# Urology (this is probably a biggie for them)

- Hyperplasia of Prostate - Check out 600, most of the 4<sup>th</sup> digit codes, there is additional guidance on coding symptoms
- 788.6 Other Abnormality of Urination, additional new 5<sup>th</sup> digit codes
  - 788.64 – Urinary hesitancy
  - 788.65 - Straining on urination

# Altered Mental Status

- New in the general symptoms
- 780.97 Altered Mental Status – identification of changes in a patient's usual mental functioning/state, but without any diagnosed disorder or cause. Change in mental status.

# Medium Stuff

- Tell your radiology department
- Specific guidance on how to code mammographic calcification/calculus
- 793.89 Other abnormal findings on radiological examination of breast now specifically includes mammographic calcifications/calculus
- New 5<sup>th</sup> digits
- 793.9 – Nonspecific abnormal findings on radiological and other examinations of body structure, Other – now requires 5th digit
- 739.91 – Image test inconclusive due to excess body fat (note: use additional coded to identify Body Mass Index if known)
- 739.99 – Other nonspecific abnormal findings on radiological and other examination of body structure

# New V Codes

Tell your gastrointestinal and general surgeons

Was V18.5 Digestive Disorders, now requires 5<sup>th</sup> digit

Was V45.89 Other Postprocedural Status, now requires 5<sup>th</sup> digit

New V codes:

- V18.51 - Colonic Polyps
- V18.59 - Other Digestive Disorders
- V45.86 - Bariatric Surgery Status

# New/Revised Codes

## Who Cares??

# Anemia & Epilepsy Revised

- Anemia
  - 285.29 - changed the word “illness” to “disease”
- Epilepsy – some minor changes, but not usually on super bills/templates, so just a note to your neurologist is fine -
  - 345.4 - The code title changed from Partial epilepsy without impairment of consciousness to:
    - localization-related (focal) (partial) epilepsy and epileptic syndromes **with complex** partial seizures
      - 345.40 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **complex** partial seizures, **without** mention of intractable epilepsy
      - 345.41 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **complex** partial seizures, **with** intractable epilepsy
      - 345.51 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **simple** partial seizures, with intractable epilepsy
      - 345.80 – Other forms of epilepsy and recurrent seizures, **without** mention of intractable epilepsy
      - 345.81 – Other forms of epilepsy and recurrent seizures, **with** intractable epilepsy

# Encephalitis Language Revised

- Basically what was previously, the category was called “Encephalitis, myelitis, and encephalomyelitis” but all the 4<sup>th</sup> digit categories were just called “Encephalitis”
  - They expanded the “Encephalitis” to include all three diseases, and then made 5<sup>th</sup> digit codes for more specificity. For example:
- 323.01 Encephalitis And Encephalomyelitis In Viral Diseases Classified Elsewhere
- 323.02 Myelitis In Viral Diseases Classified Elsewhere
- 323.41 Other Encephalitis And Encephalomyelitis Due To Infection Classified Elsewhere
- 323.42 Other Myelitis Due To Infection Classified Elsewhere
- 323.51 Encephalitis And Encephalomyelitis Following Immunization Procedures
- 323.52 Myelitis Following Immunization Procedures
- 323.61 Infectious Acute Disseminated Encephalomyelitis (Adem)
- 323.62 Other Postinfectious Encephalitis And Encephalomyelitis
- 323.63 Postinfectious Myelitis
- 323.71 Toxic Encephalitis And Encephalomyelitis
- 323.72 Toxic Myelitis
- 323.81 Other Causes Of Encephalitis And Encephalomyelitis
- 323.82 Other Causes Of Myelitis

# New Codes - (280-289)

Let your Hematology Department know

288.0 Agranulocytosis - now needs 5<sup>th</sup> digit and is now

- 288.0 Neutropenia
  - 288.00 - Neutropenia, unspecified
  - 288.01 - Congenial Neutropenia
  - 288.02 - Cyclic Neutropenia
  - 288.03 - Drug Induced Neutropenia
  - 288.04 - Neutropenia due to Infection
  - 288.09 - Other Neutropenia
- 288.4 Hemophagocytic Syndromes (new 4<sup>th</sup> digit)
- 288.5 Decreased White Blood Cell Count (new 4<sup>th</sup> digit, which needs 5<sup>th</sup> digit)
- 288.50 Leukocytopenia, unspecified
- 288.51 Lymphocytopenia
- 288.59 Other Decreased White Blood Cell count
- 288.6 Elevated White Blood Cell Count (new 4<sup>th</sup> digit, which needs 5<sup>th</sup> digit)
  - 288.60 - Leukocytosis, unspecified
  - 288.61 - Lymphocytosis (symptomatic)
  - 288.62 - Leukemoid reaction
  - 288.63 - Monocytosis (symptomatic)
  - 288.64 - Plasmacytosis
  - 288.65 - Basophilia
  - 288.69 - Other elevated white blood cell count
- 289.5 Other Diseases of Spleen (added a new 5<sup>th</sup> digit)
  - 289.53 - Neutropenic splenomegaly
- 289.8 Other Specified Disease of Blood and Blood-Forming Organs (added a new 5<sup>th</sup> digit)
  - 289.83 - Myelofibrosis



# New Ophthalmology 5<sup>th</sup> Digit Codes

- 377.43 Optic Nerve Hypoplasia
- 379.60 Inflammation (Infection) Of Postprocedural Bleb, Unspecified
- 379.61 Inflammation (Infection) Of Postprocedural Bleb, Stage 1
- 379.62 Inflammation (Infection) Of Postprocedural Bleb, Stage 2
- 379.63 Inflammation (Infection) Of Postprocedural Bleb, Stage 3

# New Codes - Mucositis

- Let your oncology providers know
  - 478.11 - Nasal Mucositis (Ulcerative)
  - 528.00 - Stomatitis And Mucositis, Unspecified
  - 528.01 - Mucositis (Ulcerative) Due To Antineoplastic Therapy
  - 528.02 - Mucositis (Ulcerative) Due To Other Drugs
  - 528.09 - Other Stomatitis And Mucositis (Ulcerative)
- 538 - Gastrointestinal Mucositis (Ulcerative)
  - 616.81 Mucositis (Ulcerative) Of Cervix, Vagina, And Vulv
  - 616.89 Other Inflammatory Disease Of Cervix, Vagina And Vulva
- Note – Use An Additional E Code To Identify Adverse Effects Of Therapy

# New Codes – Genetic Screening

- New subcategory:
- **V82.7 Genetic Screening** (excludes include procreative management V26.31-V26.32)
- **V82.71 Screening For Genetic Disease Carrier Status**
- **V82.79 Other Genetic Screening**

# Code Changes

Affects Inpatient Services

# Adverse Effect 995.2 has 5<sup>th</sup> digits

- 995.2 – Unspecified adverse effect of drug, medicinal and biological substance – now has 5<sup>th</sup> digits
- 995.20 – Unspecified adverse effect of unspecified drug, medicinal and biological substance
- 995.21 – Arthus phenomenon
- 995.22 – Unspecified adverse effect of anesthesia
- 995.23 – Unspecified adverse effect of insulin
- 995.27 – Other drug allergy
- 995.29 – Unspecified adverse effect of other drug, medicinal and biological substance

# Chronic Kidney Disease

## Revised

- Tell your Nephrology providers
- Revised fifth digit subclassifications for reporting hypertensive heart and chronic kidney disease (404 – and note the addition of the word “chronic” to the category descriptor)
- Without heart failure or chronic kidney disease and with chronic kidney disease stage I through stage IV, or unspecified Use additional code to identify the stage of chronic kidney disease (585.1-585.4, 585.9)
- With heart failure and with chronic kidney disease stage I through stage IV, or unspecified Use additional code to identify the stage of chronic kidney disease (585.1-585.4, 585.9)
- Without heart failure and with chronic kidney disease stage V or end stage renal disease Use additional code to identify the stage of chronic kidney disease (585.5, 585.6)
- With heart failure and chronic kidney disease stage V or end stage renal disease Use additional code to identify the stage of chronic kidney disease (585.5-585.6)

# Revised/Modified Codes – Diseases of Blood and Blood Forming Organs ( 280-289)

2006	2007
288.4 – was decreased white blood cell count	288.4 - now is hemophagocytic syndrome
288.50 – was leukocytosis, unspecified	288.50 - now is Leukocytopenia, unspecified
288.51 – was lymphocytosis (symptomatic)	288.51 - now is Lymphocytopenia
288.59 – was other elevated leukocytes	288.59 - now is other decreased white blood cell count

Let your Hematology Department know

# New Neonatal Codes

These will be coded by inpatient coders who use coding books, so they will find them

New neonatal codes include these codes:

- 768.7 Hypoxic-ischemic Encephalopathy (Hie)
- 770.87 Respiratory Arrest Of Newborn
- 770.88 Hypoxemia Of Newborn
- 775.81 Other Acidosis Of Newborn
- 775.89 Other Neonatal Endocrine And Metabolic Disturbances
- 779.85 Cardiac Arrest Of Newborn



# New Orthopedic Subcategory

- 729.7 - A new subcategory for nontraumatic compartment syndrome
- 729.71 Nontraumatic compartment syndrome of upper extremity
- 729.72 Nontraumatic compartment syndrome of lower extremity
- 729.73 Nontraumatic compartment syndrome of the abdomen
- 729.79 Nontraumatic compartment syndrome of other sites
- 731.3 - New code for major osseous defects - A condition of extensive, localized bone loss that has important implications regarding future diagnosis and restoration options.

# New 5<sup>th</sup> digit Codes - Lymphatic

Tell your Hematology Dept

238.7 – Other lymphatic and hematopoietic tissues  
(MHS had 3,735 cases in 2006) – now requires a fifth digit

Now use:

238.71 – Essential thrombocythemia

238.72 – Low grade myelodysplastic syndrome lesions

238.73 – High grade myelodysplastic syndrome lesions

238.74 – Myelodysplastic syndrome with 5q deletion

**238.75** – Myelodysplastic syndrome, unspecified

**238.76** – Myelofibrosis with myeloid metaplasia

238.79 – Other lymphatic and hematopoietic tissues

# Other New Codes (you'll probably never use these, but in case someone quizzes you )

429.83 - Takotsubo Syndrome. Also called the broken heart syndrome. A **rare** condition characterized by chest pain, electrocardiographic abnormalities

518.7 - Transfusion related acute lung injury (TRALI). A pulmonary disorder occurring 1-6 hours post transfusion that is characterized by pulmonary distress, bilateral noncardiogenic pulmonary edema, hypotension, fever, and hypoxemia.

780.32 - Complex Febrile Convulsions. Fever-associated seizures that are prolonged (usually more than 15 minutes) or reoccur within 24 hours, and usually focus on one part of the body.

# Other New Codes (you'll probably never use these, but in case someone quizzes you )

- 608.20 Torsion Of Testis, Unspecified
- 608.21 Extravaginal Torsion Of Spermatic Cord
- 608.22 Intravaginal Torsion Of Spermatic Cord
- 608.23 Torsion Of Appendix Testis
- 608.24 Torsion Of Appendix Epididymis
- 618.84 Cervical Stump Prolapse
- 629.29 Other Female Genital Mutilation Status
- 795.81 Elevated Carcinoembryonic Antigen [Cea]
- 795.82 Elevated Cancer Antigen 125 [Ca 125]
- 795.89 Other Abnormal Tumor Markers

# New Codes

## Dental Codes

# New Dental Code Changes

Let your Dental Department know

- 521.06 - Dental caries pit and fissure
- 521.07 - dental caries of smooth surface
- 521.08 - dental caries of root surface
- **521.81 - cracked teeth**
- 523.30-523.32 - acute and chronic forms of gingivitis (both plaque and non-plaque induced), aggressive periodontitis
- 523.40-523.42) - chronic periodontitis
- 525.67 - code noting failed or faulty restoration efforts (e.g., poor aesthetics of existing restoration)
- 523.1 – Chronic gingivitis – now requires a 5th digit –Now use:
  - 523.10 – chronic gingivitis, plaque induced
  - 523.11 – chronic gingivitis, non-plaque induced
- 523.3 – Acute Periodontitis Note – Category name has changed to:
- 523.3 – Aggressive and acute periodontitis - now requires 5th digit
  - 523.30 – Aggressive periodontitis, unspecified
  - 523.31 – Aggressive periodontitis, localized
  - 523.32 – Aggressive periodontitis, generalized
  - 523.33 – Aggressive periodontitis

# Dental

- 523.40 Chronic Periodontitis, Unspecified
- 523.41 Chronic Periodontitis, Localized
- 523.42 Chronic Periodontitis, Generalized
- 525.60 Unspecified Unsatisfactory Restoration Of Tooth
- 525.61 Open Restoration Margins
- 525.62 Unrepairable Overhanging Of Dental Restorative Materials
- 525.63 Fractured Dental Restorative Material Without Loss Of Material
- 525.64 Fractured Dental Restorative Material With Loss Of Material
- 525.65 Contour Of Existing Restoration Of Tooth Biologically Incompatible With Oral Health
- 525.66 Allergy To Existing Dental Restorative Material
- 525.67 Poor Aesthetics Of Existing Restoration
- 525.69 Other Unsatisfactory Restoration Of Existing Tooth
- 526.61 Perforation Of Root Canal Space
- 526.62 Endodontic Overfill
- 526.63 Endodontic Underfill
- 526.69 Other Periradicular Pathology Associated With Previous Endodontic Treatment

# “Deleted” Codes

- Understand on the list DoD FY07 list, we have a bunch of “deleted” codes.
- Obviously, they are not deleted in the book.
- They are “deleted” off the MHS tables of what can be used, because usually they are subcategories which now have 5<sup>th</sup> digit codes, so the 4-digit subcategory cannot be used in ADM/CCE/AHLTA...



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Questions?